



2011 Change Form

First Name: _____ Middle Initial: _____ Last Name: _____
 Address: _____ City: _____ State: _____
 Daytime Phone: _____ Email: _____

Event/ Race Changes (\$10 Fee – Allowed Until September 17, 2011)

Switch From → → → Switch To
 (circle one) (circle one)

Marathon	Marathon
Half Marathon	Half Marathon
5k Run/Walk	5k Run/Walk

PLEASE NOTE:

There will be a \$10 fee to change from one race to another race plus any additional race fees if you are changing to a higher priced race. When changing from a shorter distance race to a longer distance race applicable fees must be paid before the change will be made. Refunds will not be made when changing from a longer distance to a shorter distance event.

Division Changes (No Fee)

Switch From → → → Switch To
 (check one) (check one)

Half Marathon

<input type="checkbox"/> Competitive Walk	<input type="checkbox"/> Open
<input type="checkbox"/> Open	<input type="checkbox"/> Competitive Walk

Relay Marathon Team Name: _____

<input type="checkbox"/> Male	<input type="checkbox"/> Male
<input type="checkbox"/> Female	<input type="checkbox"/> Female
<input type="checkbox"/> Mixed	<input type="checkbox"/> Mixed
<input type="checkbox"/> Corporate	<input type="checkbox"/> Corporate

Transfer Your Entry to Another Participant (\$10 Fee – Must be Done By September 2, 2011 – NO EXCEPTIONS!)

Race YOU are signed up for: _____

You are Transferring Your Race Entry To: _____
 (Include a full race application for the new person)

PLEASE NOTE:

There will be a \$10 fee to transfer your entry to another participant. You must transfer your entry to a participant in the same race as you are registered for at the time of the transfer. If you transfer to a different event and to another person, you will be assessed a \$10 fee for each change, plus any applicable race fees. All participant-to-participant transfers must be completed by September 2, 2011 and will NOT be accepted after this date.

Registration changes will NOT be processed until a signed change form and additional funds are received.

I hereby authorize the aforementioned changes to my 2011 Community First Fox Cities Marathon presented by Kimberly-Clark Registration (Marathon, Half Marathon, 5K Run/Walk, Relay Marathon). I understand that changes to my registration will not be made until this form and proper payment are received by race headquarters.

Participant Signature _____

Date _____

① Send form and check to:
 Community First Fox Cities Marathon
 Attn: Mindi Dunaway
 P.O. Box 1315
 Appleton, WI 54912-1315

OR

② Call 1-877-230-7223 with Credit Card Number & Fax Form to (920) 830-0921 or mail form to above address.

OR

③ Fill in your VISA or MasterCard credit card information here:

Credit Card Number _____

____/____ Credit Card Expiration Date

Name on Credit Card _____

After completing the form (including credit card information), send the completed form to the above address.

If you have any questions, please call us at 1-877-230-7223 or (920) 882-9499.

Date Received _____

Approved By _____